



Contents

<i>Breaking News</i>	1
Non-Emergent Medical Transportation (NEMT) Transition	1
Colorado Community Living Plan	2
Update on HB 09-1353: Elimination of 5 Year Bar	2
Drug Coverage Update	2
HCPF's New Website	2
Increase Enrollment	3
Spotlight: Shanna Wisdom, Community Health Coordinator	3
Colorado Health Foundation 2015 Open Enrollment Kick-Off	3
PEAKmobile Launched	4
PEAK Trainings	4
Improve Health Outcomes	5
Accountable Care Collaborative: Medicare – Medicaid Program	5
Medicaid Dental Benefit Update	5
Colorado Dental Health Care Program for Low-Income Seniors Advisory Committee Seeks Members	6
Depression Screenings	7
School-Based Substance Abuse Prevention and Intervention (SAPI) Grant Program	7
Contain Costs	7
Accountable Care Collaborative Update	7
Upcoming Feedback Opportunities for Accountable Care Collaborative (ACC) Request for Proposal	7
Medical Services Board	8
Public Rule Review Opportunities	8
Employment Opportunities	8
Enrollment	8

Breaking News

Non-Emergent Medical Transportation (NEMT) Transition

The Department has issued a 'Notice of Intent to Award' to TotalTransit for NEMT services effective October 1, 2014. TotalTransit will succeed FirstTransit. The Department's NEMT contractor provides non-emergency transportation to/from Medicaid covered health care appointments with health care providers who have a Medicaid contract. This contract covers NEMT services for Medicaid clients living in Adams, Arapahoe, Boulder, Denver, Douglas, Jefferson, Larimer and Weld counties.

The Department, TotalTransit and FirstTransit are working together to ensure a smooth transition for clients and providers. More information will be forthcoming in subsequent publications of this [Provider Bulletin](#) and other Department publications.

For more information, contact [Doug Van Hee](#).

Colorado Community Living Plan

On July 30, 2014, the Department of Health Care Policy and Financing, Department of Human Services and Department of Local Affairs unveiled Colorado's Community Living Plan which calls for community-based, long-term services and supports alternatives, and housing for individuals with disabilities living in public institutions. The Colorado Community Living Plan represents years of development and collaboration among stakeholders, advocates and state government to better serve individuals with disabilities following the 1999 United States Supreme Court decision [*Olmstead v. L.C.*](#) (Olmstead). The Olmstead decision found that unnecessary segregation of individuals with disabilities in institutions is a form of discrimination based on disability. Here is the [Colorado Community Living Plan](#) in its entirety.

For more information, contact [Tim Cortez](#).

Update on HB 09-1353: Elimination of 5 Year Bar

[HB 09-1353](#) allows the Department to eliminate the five-year residency bar for Medicaid and Child Health Plan *Plus* (CHP+) eligibility for legally present children, and eliminates the five-year residency bar for CHP+ eligibility for legally present pregnant women.

The State Legislature approved funding to implement [HB 09-1353](#) during this past legislative session, with a funding effective date of July 1, 2014. **Although funding was granted, the Department must still seek Federal authority to implement this policy.** This means that the Department cannot provide coverage to these individuals effective July 1, 2014.

The Department will be sure to keep you informed of the guidance received from CMS, information on the public rule process as it moves before the Medical Services Board, as well as what actions will be necessary for counties to take to ensure a Summer 2015 implementation.

For more information, [see our FAQs](#) or contact Medicaid.Eligibility@hcpf.state.co.us.

Drug Coverage Update

Effective August 1, 2014, short acting opioids will be limited to a total of 120 tablets per 30 days, per member. If more than one agent is used, the combined total utilization may not exceed 120 units in 30 days. Exceptions will be made for members with a diagnosis of a terminal illness or sickle cell anemia.

For members who are currently receiving more than 120 tablets and who do not have a qualifying exemption diagnosis, a grace period can be granted via the prior authorization process for providers to taper utilization. Long acting opioids will be discussed at the upcoming Drug Utilization Board meeting for the institution of quantity limits.

For more information, contact [Kelli Metz](#).

HCPF's New Website

We will be upgrading our website in mid-August. The original July launch date has been delayed so improvements can be made to the site's accessibility for people with disabilities using screen readers and other assistive technology.

Once the new site launches, anyone linking to our current website will be redirected to our new home page. The content, navigation and layout of the new website will be very different from the

old website. Read our [Frequently Asked Questions](#) to find more about the new website and to find out what you can do to help us improve our content.

For more information, contact [Michelle Adams](#) or [Joel Risberg](#).

Increase Enrollment

This section of At a Glance features Family Health Coordinators, counties and others on the front lines assisting Medicaid and CHP+ clients. The Q & A will highlight successful local strategies for reaching clients.

Spotlight: Shanna Wisdom, Community Health Coordinator

Location: Northeast Colorado Health Department (Logan, Morgan, Phillips, Sedgwick, Washington and Yuma counties)

Number of Years Working with Medicaid Clients: 1 year, 7 months



Question: What has worked well in reaching your community?

Answer: We attend numerous community meetings to keep our relationships with community partners strong. We visit Healthy Child Clinics and Child Finds to provide outreach to clients. Additionally, we partner with other programs housed within the Northeast Colorado Health Department, such as Healthcare Program for Children with Special Needs (HCP) the Supplemental Nutrition Program for Women, Infants, and Children (WIC), Immunization Program, and Family Planning to reach current and potential clients.

We have also developed a joint Healthy Communities and Connect for Health Colorado local brochure and flyer that we have distributed to our communities.

Key Statistics: As a team of part-time Family Health Coordinators, we average about 180 interactions per month.

If you or someone you know is a Family Health Coordinator with a story or best practices for outreach to share in a future edition of At a Glance, contact [Jeff Helm](#).

Colorado Health Foundation 2015 Open Enrollment Kick-Off

The Colorado Health Foundation is hosting a statewide kick-off training on October 14-15 event in preparation of the 2015 open enrollment with the Colorado Department of Health Care Policy and Financing, the Colorado Division of Insurance and Connect for Health Colorado.

The event will bring together health coverage guides, assistance sites, brokers and agents, community-based organizations and advocates for training on the technical aspects of enrollment as well as capacity-building for marketing, messaging and outreach.

2015 Open Enrollment Kick-off Event

October 14-15, 2014
Crowne Plaza DIA
15500 E. 40th Ave.
Denver, CO 80239

More details will be available in the August issue of At a Glance.

PEAKmobile Launched

Clients and applicants can now access *PEAKmobile*, the mobile version of the PEAK website, from a smart phone or other mobile device with a small screen. Anyone who visits the PEAK website from a mobile device will automatically be viewing the *PEAKmobile* website.

PEAKmobile is equipped with essential tools clients need to effectively manage their benefits, including:

- Create a PEAK Account
- Access *Account Overview*
- Check the Application Status of submitted Medical, Food and/or Cash Assistance applications
- View current Medical, Food and/or Cash Assistance benefit information
- View premium and enrollment fee details
- Make a payment
- View medical cards for each member of a client's household
- Access the *PEAK Mail Center* and benefit letters
- Upload documents needed for eligibility

Some functions will work best using the full PEAK website. The full PEAK website should be used for accessing the *Am I Eligible?* tool, submitting an application, using *Report My Changes*, or accessing the informational resources that are available from the PEAK home page. From *PEAKmobile*, there is an option to switch to the full PEAK website.

The Department encourages all Medicaid clients to create an account on [PEAK](#). With a PEAK account, clients can sign up to receiving important updates about their benefits electronically and securely through their PEAK inbox. We appreciate all of our stakeholders spreading this information to your members.

For more information see [PEAK News](#).

PEAK Trainings

Introduction to PEAK

August 6, 2014, 9:00 a.m.

Click [here](#) to access the training

New Application Walk-Through

August 11, 2014, 1:00 p.m.

Register in advance by clicking [here](#).

PEAK Support Calls

Wednesday, August 6, 2014

12:00 - 1:00 p.m.

Dial-in: 1-712-432-0220| Passcode: 5642211#

For a complete list of training webinars visit the PEAK Outreach Training Calendar [here](#).

Improve Health Outcomes

Accountable Care Collaborative: Medicare – Medicaid Program

The Department will begin enrolling eligible clients into the Accountable Care Collaborative (ACC): Medicare-Medicaid Program. The program will integrate and coordinate physical, behavioral and social health needs for over 50,000 full-benefit Medicare-Medicaid clients. The first group of clients will begin receiving enrollment notices at the end of this month and the program will begin September 1, 2014.

Full benefit Medicare-Medicaid enrollees that are not already participating in an integrated system of care will be passively enrolled in the program and are able to opt-out of the program if they wish. Clients who participate in this program keep all their Medicare and Medicaid benefits and services and now have free assistance to achieve their health care goals and make Medicare and Medicaid work better together for them.

For more information, contact [Van Wilson](#).

Medicaid Dental Benefit Update

The Department has contracted with [DentaQuest](#) as its Administrative Services Organization (ASO) to help manage the Medicaid adult and children's dental benefit programs and provide a customer service center for Medicaid dental questions. DentaQuest began administration of dental benefits, claims and prior authorization requests for the Colorado Medicaid Dental Program on July 1, 2014.

You can reach DentaQuest's Member Services at 1-855-225-1729 (TTY 711), Monday – Friday between 7:30am – 5:00pm or visit their website at www.DentaQuest.com.

Providers can contact DentaQuest's Provider Services at 1-855-225-1731 (TTY 711) if they need assistance or they can visit DentaQuest's Providers [website](#).

Adult Dental Program Rule Update

You may view the final version of the Adult Dental rule, which outlines the more comprehensive adult dental benefit that became available as of July 1, 2014, on the Code of Colorado Regulations website [here](#), scroll to section 8.201 of the rule (page 17).

The final rule includes stipulates complete and partial dentures benefit will be subject to prior authorization and will not be subject to the \$1,000 annual maximum for dental services for adults age 21 and over. Although the complete and partial dentures benefit is not subject to the \$1,000 annual maximum for the adult dental services, they will be subject to a set Medicaid allowable rate.

Qualified and Service Limited Medicare Beneficiaries and the Adult Dental Benefit

State Medicaid programs now pay Medicare premiums, deductibles and co-insurance for Medicare recipients with limited income and resources. These individuals are called Qualified Medicare Beneficiaries (QMB) and Service Limited Medicare Beneficiaries (SLMB). Such premium assistance is meant to ensure individuals have access to the Medicare benefit.

While these individuals have a Medicaid ID number for the purposes of paying their Medicare premiums, these individuals do not usually qualify for prescriptions and Medicaid medical benefits, including adult dental benefits, because of income.

More information is available in the [Provider Bulletins](#) and on the Department's [Provider Services](#) web page.

Colorado Dental Health Care Program for Low-Income Seniors Advisory Committee Seeks Members

The Department is seeking candidates to serve on the Colorado Dental Health Care Program (the Program) for Low-Income Seniors Advisory Committee (the Committee) (see [Senate Bill 14-180](#)).

The Committee will serve as a forum where the Department and the stakeholder community can discuss the Program. It will also advise the Department on the operation of the Dental Program and make recommendations to the Medical Services Board per [Senate Bill 14-180](#).

The Committee members will be asked to meet regularly. Initially the Committee will meet no less than every two (2) weeks at the Department. The meeting time will decrease once the Dental Program has been established in all aspects of a functional program. The initial meeting of the Committee is tentatively scheduled for August 27, 2014 at 3 pm.

The Department is seeking candidates to fill each of the following interest areas on the Committee:

1. An individual representing the Department;
2. A dentist in private practice providing dental care to the senior population who represents a statewide organization of dentists;
3. A dental hygienist provider dental care to seniors;
4. A representative of either an agency that coordinates services for low-income seniors or the office in the Department of Human Services (DHS) responsible for overseeing services to the elderly;
5. A representative of an organization of Colorado community health centers, as defined in the Federal "Public Health Service Act", 42 U.S.C. sec.254b;
6. A representative of an organization of safety-net health providers that are not community health centers;
7. A representative of the University of Colorado School of Dental Medicine;
8. Two (2) consumer advocates;
9. A senior who is eligible for services under the program; and
10. A representative of a foundation with experience in making dental care grants.

If you, or someone else you may know, is interested in participating on the Committee, please send a detailed email describing the following:

- Which interest area you would fill;
- A brief description of your relevant experience;
- Your role with your current organization and your relationship with low-income seniors; and
- Why you would like to serve on the Committee.

In addition to the information requested above, feel free to include a current resume or any supplemental information you think would be helpful for our decision.

Please email your expression of interest and any supporting materials to my attention at Chandra.Vital@state.co.us with the subject: *Dental Program Advisory Committee Membership*. Please respond by August 4, 2014.

For additional information, please contact [Chandra Vital](#), 303-866-5506.

Depression Screenings

In an effort to facilitate more postpartum depression screening, Pediatric Primary Care Offices may now use the infant's Medicaid ID number to bill for postpartum depression screening of the mother during a well-baby visit. It is still preferable that the mother's Medicaid ID number is used to bill for the screening, though it is no longer required. Postpartum depression screening is limited to one screening per year. Please see the August 2014 [Provider Bulletin](#) for further details on the policy.

For more information, contact [Alex Stephens](#).

School-Based Substance Abuse Prevention and Intervention (SAPI) Grant Program

The SAPI Program grants funds to schools, community-based organizations and health organizations to provide school-based prevention and intervention programs to reduce the risk of marijuana and alcohol use and prescription drug misuse by Colorado school-aged children.

A Request for Grant Proposals (RGP) will become available on the Department website by September 15, 2014 with applications tentatively due on November 4, 2014.

The Department will be hosting a stakeholder meeting to review and receive input on the draft grant procedures, policies and timelines. The stakeholder meeting will take place on August 26, 2014 at 1:00 p.m. at 225 16th Ave, First Floor Conference Room, Denver, CO 80203. Conference call will be available. To obtain call in information and to RSVP please contact [Shannon Huska](#), 303-866-3131, by Friday, August 22, 2014.

Contain Costs

Accountable Care Collaborative Update

The Accountable Care Collaborative (ACC) Program represents a committed effort to transform the Medicaid program into a system of better care for all its members, and to lower costs for the State of Colorado.

Estimated ACC enrollment as of July 1, 2014 was 662,361.

Upcoming Feedback Opportunities for Accountable Care Collaborative (ACC) Request for Proposal

The Department plans to release a Request for Information (RFI) in the next month to solicit stakeholder feedback on the future of the Accountable Care Collaborative (ACC). The ACC is

Colorado's platform for transforming health care services and supporting the health of our clients. Once released, the question-only RFI will be available via [Colorado BIDS](#) or through [the Department's website](#).

For more information, contact [Kevin Dunlevy-Wilson](#).

Medical Services Board

Public Rule Review Opportunities

Partners who are interested in a one-on-one discussion with Department staff about upcoming rules are invited to attend the Department's Public Rule Review Meeting. Information is available on the [Public Rule Review Meetings](#) web page. Reasonable accommodations for the meetings are provided upon request for persons with disabilities.

If you would like more information, or to be added to the Medical Services Board email distribution list, please contact [Judi Carey](#).

Employment Opportunities

Applying for state government jobs is easy. Applications are electronic, you will receive updates, and you do not need to answer any written questions until it is determined that you meet the minimum qualifications. Check out the [website](#) for State of Colorado jobs including the Department of Health Care Policy and Financing jobs.

The Department offers a competitive benefits package that includes the Public Employees' Retirement Account (PERA), a 401K or 457 retirement plan, health and dental insurance options, 10 holidays, and accrual of paid sick and vacation time.

The Department is a tobacco-free campus.

Enrollment

In June 2014, there were 1,047,466 Coloradans enrolled in Medicaid and 57,673 Coloradans enrolled in CHP+.
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